That in cases of peritoneal inflammation in the upper portions of the abdomen simulating pleuritis, the presence of *any degree* of the peristaltic friction vibration might very much assist us in the diagnosis.

24. *Sanguineous Apoplexy in a child eleven days old.*—A case of cerebral hemorrhage, a rare occurrence in very early life, is recorded by Dr. A. D. CAMPBELL in the *Northern Journal of Medicine* for Jan. last. The infant was a stout healthy male, and until the morning of the day on which he died, had shown no symptoms of disease. About seven A. M. he vomited frequently, and in an hour and a half afterwards was suddenly seized with violent convulsions, tossing about the head and limbs, rolling the eyes, and accompanying these movements with loud shrieks; in this state he was found by the gentleman who was requested to visit him. The pulse was at this time extremely rapid and hard, the pupils were contracted, the head hot; but the body and legs, especially the latter, felt cold to the touch, and attempts to vomit were occasionally made. The child was immediately placed in a warm bath, cloths dipped in cold water were applied to the head, and a powder composed of calomel and scammony exhibited. When the infant was removed from the bath, leeches were directed to be applied, and the other treatment usually employed in such cases was judiciously and energetically resorted to. In two hours thereafter a second powder similar to the first was given, as the bowels remained unmoved, and the symptoms continued unabated. At noon the child was again seen; it then appeared to suffer under all the symptoms of compression of the brain, precisely similar to those generally observed in the last stage of acute hydrocephalus; the convulsive movements of the limbs had subsided, it emitted occasionally a low moan, the pupils of both eyes were widely dilated, and the pulse was frequent, small, and feeble. A blister was now applied to the head, and two grains of calomel with five of jalap ordered to be given every second hour until the bowels were moved. In spite of the treatment, however, the child never showed the slightest signs of amendment, and died between six and seven the same evening, after an illness of rather less than twelve hours' duration. On examination of the body after death, its external appearance presented nothing unusual. On opening the cranium, and reflecting the dura mater from the circumference of each hemisphere towards the mesial line, I found the superficial vessels of the organ distended with blood; and on the surface of the middle lobe of the right hemisphere a small ecchymosed spot, of about three-eighths of an inch in diameter, situated under the arachnoid, which was quite transparent, and not clouded by any lymph effusion. On making a vertical section through this spot, I saw that it was the apex of a clot, nearly of the size and shape of half a small walnut shell, with the concavity directed upward. The blood was of the consistence and colour of thin currant jelly. The substance of the brain in contact with the clot was of an ochre colour, much softened, reduced in fact to pulp, to the depth of about an eighth of an inch all round. This pulp was examined with the microscope, and consisted of the tissue of the brain, numerous blood-globules, and fluid, but contained none of the corpuscles characteristic of inflammatory softening. The other parts of the brain when cut into were less firm than usual, especially in the affected hemisphere, which seemed as if infiltrated with colourless serum. The quantity of fluid in the ventricles was not greater than natural, and the brain exhibited no other abnormal appearance. The examination of the other cavities of the body was not permitted. On account of the unusual occurrence of the affection in so young a subject, the scalp, bones of the cranium, and external surface of the body, were again carefully inspected, but no mark of violence was discernible thereon.

From the microscopic examination of the softened tissue surrounding the clot, Dr. C. is inclined to regard its pulpy condition neither as resulting from previous inflammation, nor as arising from the irritation produced by the clot as a foreign body, but as caused by the effused blood having forced its way into and broken up the tissue immediately adjacent to the extravasation.

25. *Treatment of Chronic Eczema.*—Mr. B. PHILLIPS states, in the *Lond. Med. Gaz.*, March 1845, that he has treated with signal success many cases of chronic eczema, by the following simple plan:

He purges the patient with calomel gr. v, jalap gr. xv, and two days afterwards repeats the purgative. He has the affected part bandaged, and the bandages wet with warm water, and covered with oil silk, so as to constitute a constant tepid bath. He also gives the liquor arsenicaliso *minim* v. twice a-day.

26. *Ossified Gall-Bladder.*—Dr. S. S. Alison relates, in the *London Med. Gaz.*, Nov., 1844, an example of this, which he found in a female who had died of acute bronchitis of the left side. The patient had been singularly healthy throughout life, had never suffered any symptom of bilious diseases and was of temperate habits. With the exception of the gall-bladder, the contents of the pelvis and abdomen presented their natural characters. The gall bladder was white or grayish, resembling fresh putty, hard and resisting to the touch. It was distended with fluid bile: the cystic duct was obstructed with solid cholesterine. The outer coat of the gall bladder was greatly thickened, and contained much phosphate of lime. The gall bladder was very firmly attached to the liver. No signs of inflammation, either old or recent, were discovered in the bladder itself, or in the surrounding structures.

27. *Report of the Committee of Vaccination, made to the Academy of Sciences of France, Feb.* 25th, 1845.—In 1840 the Academy of Sciences proposed the following questions as a subject for a prize essay:—

1. Is the preservative power of vaccination absolute or merely temporary? If it is temporary only, determine by accurate experiments and authentic facts, what is the period for which the vaccine matter exerts its protective influence against small-pox? 2. Has vaccine matter taken directly from the cow, a more certain and durable protecting power than vaccine matter transmitted a greater or lesser number of times through the human subject? 3. If the protective power of vaccine matter becomes enfeebled, should it be renewed. and if so, how? 4. Is it necessary to vaccinate the same individual several times, and if so, after how many years should the vaccination be repeated? The part of the report now read relates to the two first questions only.

The protecting power of vaccination being definitely established, the question arises—Is it possible, after forty-five years' experience, to determine the limits of that power? The answer to this question is difficult in the extreme, as it embraces inquiries not in France alone, but throughout the whole world: in fact, a general investigation of every case in which vaccination had been performed could alone supply the fundamental elements of the problem to be answered. The commission consequently announced in their report of 1840 that they did not expect the memoirs of the competitors for the prize to contain a general and definite answer, but a partial solution, only preparatory to that which time may perhaps ultimately afford.

The competitors for the prize have particularly examined how vaccinated persons are circumstanced during the prevalence of epidemic small-pox; in other words, what is the proportion of vaccinated persons in the entire number of those attacked with small-pox. The protective power of vaccination is by this mode of investigation reduced to a numerical question. An attentive examination of what occurred during thirty epidemics of small-pox in France shows two important facts—First, that somewhat more than one-third of the entire number of persons attacked with the small-pox had been vaccinated; secondly, that the mortality among the vaccinated persons was very small. According to the author of one of the memoirs, more than one-third of those attacked in the epidemics which occurred at Montbeillard had been vaccinated, but there was no corresponding increase in the amount of mortality amongst the vaccinated patients; and the same result was observed in the epidemic of 1828 at Marseilles. The same results follow from an examination of the epidemics that have occurred in England, Sweden, Denmark, Italy, Malta, Geneva, &c.

The fact, then, being established, that vaccinated persons can become affected with small-pox, and the proportion so attacked during epidemics being nearly determined, a most important problem remained to be solved—viz., what was the condition of the vaccinated persons affected as regarded the mere fact of their vaccination? The authors of all the memoirs agree in stating that vaccinated